

Board Member | Board Alternate | Committee Member Travel Expense Claim Form

Meeting Attended:	Date	Location	
Daveagel Cay Mileage		Miles	Cost
Personal Car Mileage Personal car mileage is reimbursed at the curre	ntly allowable IRS rate 0f \$0.56 per mile	ivilles	Cost
Rental Car			
\$75/day maximum. Attach original receipt.			
Commercial Airline			
\$600/day maximum. Attach original receipt.			
Private or Chartered Aircraft \$600 per person. Up to 400 miles roundtrip \$800 per person. Over 400 miles roundtrip When transporting other board members attack	h a signed sheet stating all passengers	Passengers	
Hotel Room + Tax \$150 per day maximum. Attach original receipt	t.		
Meals	Date(s)	Meals	
Breakfast \$10			
Lunch \$15			
Dinner \$30			
If you paid for another member's meal, please i	indicate their name:		
Parking			
Attach receipt for charges in excess of \$10			
Taxi, train or bus fare; Tolls Attach receipts.			
Attach receipts.			
	Total Expenses Claimed	k	
Name	Signature	Date	
Make check payable to:			